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PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).

Express Mail Label N . EL 88914913 US

INVENTOR(S)

Given Name (first and middle [if any])	Family Name or Surname	Residence (City and either State or Foreign Country)
KARIN LYNN	PETERSON	ST LOUIS, MO

 Additional inventors are being named on the _____ separately numbered sheets attached hereto**TITLE OF THE INVENTION (500 characters max)**

NIGHT LIGHT WITH SLEEP TIMER

Direct all correspondence to:

CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number	→		Place Customer Number Bar Code Label here	
OR	Type Customer Number here			
<input checked="" type="checkbox"/> Firm or Individual Name	KARIN L PETERSON			
Address	19 WALNUTWAY CT			
Address				
City	ST LOUIS	State	MO	ZIP
Country	USA	Telephone	314 878 8729	Fax

ENCLOSED APPLICATION PARTS (check all that apply)

<input checked="" type="checkbox"/> Specification Number of Pages	42	<input type="checkbox"/> CD(s), Number	
<input checked="" type="checkbox"/> Drawing(s) Number of Sheets	2	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			

METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	FILING FEE AMOUNT (\$)
<input checked="" type="checkbox"/> A check or money order is enclosed to cover the filing fees	
<input type="checkbox"/> The Commissioner is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: _____	
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.	

The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.

 No. Yes, the name of the U.S. Government agency and the Government contract number are: _____

Respectfully submitted,

SIGNATURE Karin Peterson

Date 12-20-02

TYPED or PRINTED NAME KARIN L PETERSON

REGISTRATION NO.

(if appropriate)

Docket Number:

TELEPHONE 314-878-8729**USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT**

This collection of information is required by 37 CFR 1.51. The information is used by the public to file (and by the PTO to process) a provisional application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the complete provisional application to the PTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Provisional Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

18837 U.S. PTO
10/614245

07/08/03

To the Commissioner of Patents and Trademarks:

Transmitted herewith for filing is the Utility Design Plant patent application of:

07/08/00/03 Karin Lynn Peterson

Title or invention: NIGHT LIGHT WITH SLEEP TIMER

Enclosed are the following items:

- A. Duplicate copies of this Patent Application Transmittal Form.
- B. 2 Sheet(s) of informal formal drawings.
- C. 2 Page(s) of specification.
- D. 2 Page(s) of claims.
- E. 1 Page(s) of abstract.
- F. Declaration (Signed) X (Unsigned) _____
- G. A Power of Attorney executed by the Inventor(s) Assignee.
- H. An assignment transmittal letter
- I. A verified statement to establish Small Entity status under 37 CFR 1.9 and 37 CFR 1.27
- J. An Information Disclosure Statement.
- K. A list of references (Form PTO-1449)
- L. Copies of references
- M. Preliminary Amendment
- N. Postcard
- O. Other (specify) Check No. 2388 for \$575 for Filing Fee for Small Entity.

CLAIMS AS FILED

BASIC FILING FEE:	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	<input checked="" type="checkbox"/> Utility	\$575	<input checked="" type="checkbox"/> X	\$710
<input type="checkbox"/> Design		<u>\$145</u>	<input type="checkbox"/> or	<u>\$290</u>
<input type="checkbox"/> Plant		<u>\$260</u>	<input type="checkbox"/> or	<u>\$480</u>
TOTAL CLAIMS	<u>1:8</u>	<u>- 20 = 0</u>	<u>x \$11</u>	<u>or X \$ 22 = \$ 0</u>
INDEPENDENT CLAIMS	<u>3</u>	<u>- 3 = 0</u>	<u>x \$ 37</u>	<u>or X \$ 74 = \$ 0</u>
MULTIPLE DEPENDENT CLAIMS PRESENT			<u>+ \$115</u>	<u>+ \$230 = \$ 0</u>
RECORDING FEE FOR ASSIGNMENT (\$60.00)				<u>\$ 0</u>
TOTAL FILING FEE:				<u>\$ 375</u>

The Commissioner is hereby authorized to charge and credit Deposit Account No. _____ as described below:

- Charge the total filing fee of \$_____.
- Charge any additional filing fees as required under 37 CFR 1.16 and 1.17.
- Credit any overpayment.
- Charge the issue fee required under 37 CFR 1.18 at the time of mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).

Claim for Priority Under 35 U.S.C. §120:

- The benefit under 35 U.S.C. §120 is hereby claimed from the following United States application:

Claim for Priority Under 35 U.S.C. §119:

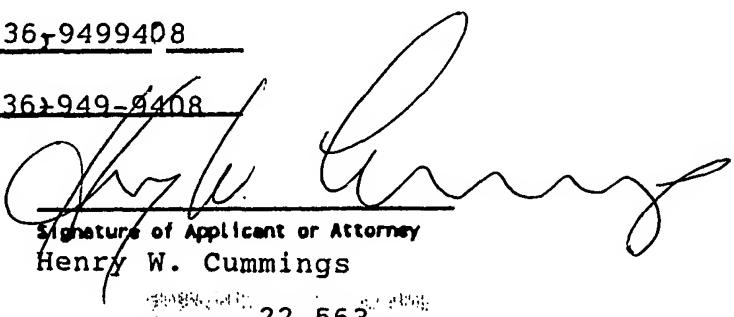
- The benefit of priority under 35 U.S.C. §119 is hereby claimed from the following foreign application:

Please address all correspondence in connection with this application to:

Henry W. Cummings
3313 W. Adams St.
St. Charles Mo.
63301

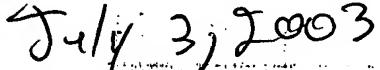
Telephone: (636) 949-9408

Facsimile: (636) 949-9408


Signature of Applicant or Attorney
Henry W. Cummings

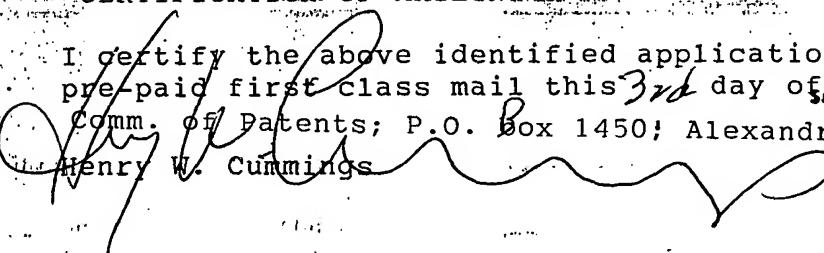
Registration No.: 22,563

Date: 3/7/03


July 3, 2003

CERTIFICATION OF MAILING

I certify the above identified application was mailed by postage pre-paid first class mail this 3rd day of July, 2003, to: ^{same day transmitted letter} page 2
Comm. of Patents; P.O. Box 1450; Alexandria VA 22313-1450.


Henry W. Cummings